



CHANGE OF CORRESPONDENCE ADDRESS *Application*

Address to:
Assistant Commissioner for Patents
Washington, D.C. 20231

Application Number	09/771,333
Filing Date	01/26/01
First Named Inventor	B. C. Conrath
Art Unit	2131
Examiner Name	Unassigned
Attorney Docket Number	07680001AA

Please change the Correspondence Address for the above-identified application to:

☐

Customer Number

Type Customer Number here

Place Customer
Number Bar Code
Label here

OR

☒

Firm or
Individual Name

Clyde R. Christofferson

Address

Whitham, Curtis & Christofferson, P.C.

Address

11491 Sunset Hills Road, Suite 340

City

Reston

State

Va

ZIP

20190

Country

US

Telephone

703-787-9400

Fax

703-787-7557

This form cannot be used to change the data associated with a Customer Number. To change the data associated with an existing Customer Number use "Request for Customer Number Data Change" (PTO/SB/124).

I am the :

☐

Applicant/Inventor.

☐

Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒

Attorney or Agent of record.

☐

Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number

RECEIVED

MAY 01 2003

Technology Center 2100

Typed or Printed
Name

Clyde R. Christofferson

Signature

Date

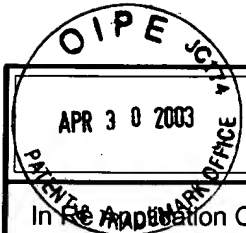
April 30, 2003

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☐

*Total of _____ forms are submitted.

#4
5-5-03
JN



**TRANSMITTAL LETTER
(General - Patent Pending)**

Docket No.
07680001AA

In Re Application Of: B. C. Conrath

Serial No.
09/771,333

Filing Date
01/26/01

Examiner
Unassigned

Group Art Unit
2131

Title: **POINT-TO-POINT DATA STREAMING USING A MEDIATOR NODE FOR ADMINISTRATION AND SECURITY**

TO THE ASSISTANT COMMISSIONER FOR PATENTS:

Transmitted herewith is:

CHANGE OF CORRESPONDENCE ADDRESS

in the above identified application.

- ☒ No additional fee is required.
- ☐ A check in the amount of _____ is attached.
- ☐ The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No. _____ as described below. A duplicate copy of this sheet is enclosed.
- ☐ Charge the amount of _____
 - ☐ Credit any overpayment.
 - ☐ Charge any additional fee required.

RECEIVED

MAY 01 2003

Technology Center 2100

Signature

Dated: April 30, 2003

Clyde R. Christofferson
Reg No. 34,138
Whitham, Curtis & Christofferson, P.C.
11491 Sunset Hills Road, Suite 340
Reston, Virginia 20190
703-787-9400



30743

PATENT TRADEMARK OFFICE

I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Signature of Person Mailing Correspondence

HAND DELIVERED

Typed or Printed Name of Person Mailing Correspondence

CC: